

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH**

**CULTURAL COMPETENCY COMMITTEE MEETING MINUTES**

**Date:** September 14, 2016

**Present:** Alesia Darden, WRS; Anita Perdomo, DMH Community & Government Relations Division; Ann Lee, SA 8 Long Beach/South Bay Geo Initiative; Antha Abraham, LACCC; Araceli Gomez; Belanie Brown, DMH/Community & Government Relations Division; Bernice Mascher, AI/AN community member; Betty Dandino, LACCC chair; Brian Valdez, Latino Coalition; Carlos Ludena, CL; Carlos Valdez, Coalición Latina; Christy Navarro, WRS; Emma Hernandez, CL; Evelyn Lemus, DMH SA 3 Admin.; Harold Turner, NAMI Urban LA; Haydee Guevara, Latino Coalition; Insung Phil Cho, Asian Coalition; Isela Gonzalez; Jennifer Wright, DMH Women Center; Karen Macedonio, SAAC 5, co-chair; Leticia Ximenez, DMH Community & Government Relations Division – CCC Co-chair; Maria Elena, CL; Maritza Lebron, NAMI West Central Clinic; Masao Tsuru, Office of Integrated Care; Mirtala Parada Ward, PSB-QID; Paul Ha; Perla Valdez, CL; Ranie Riley, SA 3 Program Admin; Robert A. Valdez, Coalición Latina; Roxana Linares, PSB-QID; Sandra Chang Ptasinski, PSB-QID; Sandra Clayton, LACC; Sharon Lyle, AAA UREP Co-Chair; Silvia Sosio, SAC 6/NAMI/Latino Coalition; Sunnie Whipple, AI/AN community member; Terry Lewis, Mental Commission; Veronica Ramirez, DMH Volunteer; Yue Hua Xu (Vicki), DMH SA 3; Zoila Ilbay, CL.

**Participants via Webex:** Judy Gililand; Luis Ramirez, AV Spa 1; Nicole Webley, Tarzana Treatment Center Spa 1; Reyna Leyva, SA 4 Administration; Sonia Hines, ChildNet Spa 8; Wendy Cabil, SAAC 1 Co-chair AV.

Agenda Items	Comments/Discussion/Recommendations/Conclusions	Action Item	Person(s) Responsible
<b>Welcome &amp; Introductions</b>	Attendee introductions		CCC membership
<b>Review of Minutes</b>	August minutes reviewed and approved.		Co-Chairs
<b>MHSOAC</b>	No Updates.		Ruth Tiscareno
<b>SLT</b>	No Update provided.		Leticia Ximenez
<b>ESM</b>	1) <u>County Behavioral Health Directors Association (CBHDA)</u> The CBHDA is currently focusing on Youth involved with the Justice System. Specifically: Mental health services available, alternative sentencing, community-based treatment, diversion and re-entry, and the impact of cultural and ethnic backgrounds on mental health needs. The CBHDA is also looking at how Counties can partner with the Probation and Justice Systems to better address the mental health needs of the youth involved in these systems.		Sandra Chang Ptasinski

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	<p>2) <u>New Cal MHSA Materials</u>            Cal MHSA is in the process of releasing new mental health brochures in some threshold and non-threshold languages. Brochures focusing on emerging refugee communities have been developed in Farsi, Iranian, Arabic, Iraqi, and Afghan. Additionally, resources in form of mental health support guides are now available in Chinese, Russian, African American, and LGBTQ populations.</p> <p>3) <u>Racial and Ethnic Mental Health Disparities (REMHDCO) Statewide Online Directory Project</u>            The goals of this project include:</p> <ol style="list-style-type: none"> <li>1. Fostering communication among CCC members across Counties</li> <li>2. Having a list of expert representatives from different cultural backgrounds readily available to all Counties</li> </ol> <p>REMHDCO requested CCC rosters from all Counties, including the names of members, contact information, and program/agency/group affiliations. This information will be posted on the REMHDCO website and be available to the public.</p> <ul style="list-style-type: none"> <li>• Consumers, family members, and community members interested in participating in REMHDCO’s Statewide Directory filled out a consent form that authorizes the PSB-CCU to release their information to REMHDCO. The form was also made available to the CCC members electronically with a submission deadline to the ESM by September 19, 2016. Information regarding consumers, family members and community members will not be released in the absence of a signed consent form.</li> <li>• Providers, staff and community-based organization members who are interested in participating were asked to email the ESM to have their information included.</li> </ul>	<ul style="list-style-type: none"> <li>• The ESM will send these resources to the CCC when they become available</li> </ul>	
<b>Presentation:            “Chaplaincy Program Cultural Competence Training”</b>	<p>A. The presenter, Chaplain Ruth Belonsky, introduced herself to the CCC and shared about her background and what inspired her to become a Chaplain.</p> <p>B. The CCC was informed about the requirements to become a Chaplain:</p> <ol style="list-style-type: none"> <li>1. Bachelor’s Degree</li> <li>2. Master’s Degree in Divinity</li> <li>3. One year of supervised residency in a hospital setting</li> </ol>		Chaplain Ruth Belonsky, MJS, BCC

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	<ul style="list-style-type: none"> <li>4. Work on a regular basis with a cohort and supervisor</li> <li>5. A process of examination and certification of competencies by a board of Chaplains</li> <li>6. 50 CEU's</li> </ul> <p>C. Aspects of cultural competence covered in the Chaplaincy training:</p> <ul style="list-style-type: none"> <li>1. Commitment to chaplaincy service for the love of people</li> <li>2. Person/family-centered focus</li> <li>3. Gathering information on acceptable behaviors, courtesies, customs, and expectations that are unique to families from cultural diverse backgrounds</li> <li>4. Taking the time to listen and ask questions if the Chaplain does not understand the patient/family, or if the Chaplain feels that he or she is not being understood</li> <li>5. Provision of language assistance services, called "Blue phone"</li> <li>6. Use of visual aids (e.g. reading pads and iPads) as needed</li> <li>7. Watching movies regarding end of life in different cultures</li> <li>8. Commitment to understanding the backgrounds and cultures of each family, and accepting the gender and age roles</li> <li>9. Understanding that the differences in culture and ethnicity are important parts of each person's identity.</li> </ul> <p>D. Sample questions that Chaplain Belonsky asks her patients/families to connect with them:</p> <ul style="list-style-type: none"> <li>1. What do you enjoy doing and why is meaningful to you?</li> <li>2. What are the smells of food that you associate with joy?</li> <li>3. What music do you love?</li> <li>4. Do you have a traditional faith? What Prayer is important to you?</li> <li>5. What is a good childhood memory that you have?</li> </ul> <p>This information is then incorporated in activities with the goal of connecting with "the souls of the patients." Examples of activities include: Singing, aromatherapy, healing touch, meditation and playing musical instruments.</p> <p>The CCC received this presentation with interest and provided the following recommendations:</p>		

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	<ul style="list-style-type: none"> <li>Recognizing their spirituality has a place in mental health services and vice versa</li> <li>The chaplaincy curriculum to include information on mental health conditions and the history of psychology</li> <li>For Chaplains to be mindful of the body, mind and spirit connection, and that culturally competent approaches are needed in working with hospitalized persons and their families</li> <li>Be mindful of terms that may be perceived as stigmatizing, such as “the dominant culture”</li> </ul>		
<b>Juvenile Justice Disparities Workgroup Presentation</b>	<p>Highlights of the Workgroup Presentation include:</p> <p>A. Goals of the questionnaire:</p> <ol style="list-style-type: none"> <li>To serve as a tool to help clinicians gain understanding of how cultural perspectives impact the youth’s perceptions of their issues and how these are manifested</li> <li>To better meet the mental health needs of youth involved with juvenile halls and camps</li> </ol> <p>B. Questionnaire items:</p> <ol style="list-style-type: none"> <li>Are you comfortable with speaking to me (the clinician)?</li> <li>How are you feeling emotionally?</li> <li>Are you close to your family members or extended family (parents, grandparents, aunts, uncles, sisters or brothers, cousins, pastor, friends, etc.)?</li> <li>What troubles you most about your circumstances or situation, personal issues, and hardships?</li> <li>How would you describe the situation or the circumstances that led to you being here?</li> <li>Did you have a parent and or parent(s) sentenced to a county jail, state or federal prison?</li> <li>How would you describe your relationship with your parent/caregiver?</li> <li>What do your family, your friends or people in your neighborhood think about you?</li> <li>What do <i>they</i> think is the reason you are here?</li> <li>What do <i>you</i> think is the reason you are here?</li> </ol>		Belanie Brown and Masao Tsuru

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	<p>11. Are there any kinds of support that make your situation better, such as support from family, friends, others or extended family such as cousins, aunts, uncles, grandparents, godparents, caretakers, etc.?</p> <p>12. Are there any kinds of stresses that make your situation worse, such as difficulties with money, home or family problems, school, peer pressure (gangs, clicks, bullying, crews (e.g. bikers, skaters, social media, etc.), taggers?</p> <p>13. For you, what are the most important aspects about your self-identity and cultural background?</p> <p>14. Is there anything about your background or self-identity that can make your situation better or worse?</p> <p>15. Sometimes people have various ways of coping with personal issues, situations and hardships like yours. What have you done to cope?</p> <p>16. Often, people look to help from many different sources, including different kinds of doctors, helpers, or healers. In the past, what kinds of support, help, advice and/or treatment have you sought to help you cope with personal issues and hardships?</p> <p>17. Has anything prevented you from seeking and getting the help, treatment or support you need?</p> <p>18. Now let's talk some more about the help and support you need. What kinds of help and support do you think would be most useful to you at this time for your situation?</p> <p>19. Are there other kinds of help and support that your family, friends or other people have suggested would be helpful for you now?</p> <p>20. Sometimes people that can help you and support you through personal issues, hardships, and situations may see things differently than you because they come from different backgrounds, culture, or have different expectations. Have you been concerned about this and is there anything that we can do to provide you with the best possible care to help you through this situation?</p> <p>C. The CCC feedback:</p> <ul style="list-style-type: none"> <li>• The Committee endorsed the Workgroup's decision for the questionnaire to replace the word "problem" with more positive language, such as "needs" or "situation"</li> <li>• The use of cultural sensitive and open ended questions is more engaging and</li> </ul>		

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	<p>conducive to dialogue with clinicians</p> <ul style="list-style-type: none"><li>The questionnaire items reflect the goal of speaking “with” the youth rather than speaking “to” the youth</li></ul> <p>Additionally, the Data Workgroup also provided pre-and posttest results from last month’s presentation to the CCC as follows:</p> <table><tr><th colspan="2">Number of Valid Responses</th></tr><tr><td>Pre-Test</td><td>25*</td></tr><tr><td>Post-Test</td><td>17</td></tr></table> <p>Number of CCC participants: 28 (*3 responses from pre-test were taken out in the process of data mining)</p> <table><tr><th colspan="2">Comparisons between Pre and Post test</th></tr><tr><td>Correct Response on Pre-Test</td><td>68.0%</td></tr><tr><td>Correct Response on Post-Test</td><td>74.5%</td></tr></table> <p>% of correct responses increase: 6.5%</p> <p>% of knowledge improvement: 9.5%</p>	Number of Valid Responses		Pre-Test	25*	Post-Test	17	Comparisons between Pre and Post test		Correct Response on Pre-Test	68.0%	Correct Response on Post-Test	74.5%		
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Next meeting	<ul style="list-style-type: none"><li>Wednesday, October 12, 2016, 1:30 pm to 3:30 pm at 550 S. Vermont Ave, 2<sup>nd</sup> floor conference room, Los Angeles, CA 90020</li></ul>														

Respectfully Submitted,

*Sandra Chang Plasinski, Ph.D.*

LACDMH

Program Support Bureau

Quality Improvement Division

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Cultural Competency Unit  
Ethnic Services Manager